| - | | | | | |
|--|---|--|---|--------------|--|
| COUNTY OF SAN DIEGO - WRITTEN DISCLOSURE | | (Clerk's Use Only - Date and Time Stamp) | | | |
| (PURSUANT TO SECTION 1000.1 OF THE SAN DIEGO COUNTY CHARTER) FILER INFORMATION: (Please type or print in ink) | | } | 100 | | |
| Cotherine Smith aba Collaborative Senices | | | | | |
| (NAME OF CONTRACTOR [INDIVIDUAL OR ENTITY] OR REGISTERED LOBBYIST) | | | | | |
| (TELEPHONE NO INCLUDING AREA CODE) (19 232 2112 | | £ | 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 | O . | |
| □ SUPPLEMENTAL FORM (Check one) □ SUPPLEMENTAL FORM (Check if presenting at Board of Supv. Mtg.) DISCLOSURE COVERS PERIOD FROM /2003 TO /2004 (Disclosure must cover the year preceding the date of the disclosure) | | | Board Mtg. Date: 3-1-00 Agenda Item: 14 Communication Rec'd.: | | |
| | | 1 | | | |
| | | Board Mtg | | | |
| | | Agenda Ite | | | |
| | | Communication Rec'd.: | | | |
| NAME AND ADDRESS OF CONTRACTOR: (atherine Smith 427 CStreet #200 San Digo | | County Department Contact: | | | |
| U | | Name | | | |
| ADDRESS OF REGISTERED LOBBYIST (IF APPLICABLE) | | Department Phone: () | | | |
| n/a | | Phone: (|) | | |
| REPORTABLE DISCLOSURE: (Check Yes or No |) below) | | | | |
| | | | Sections A and/ | D | |
| YES If you HAVE gifts and/or applicable, and Sections | r contributions to report, ple C D and F | ease complete | e Sections A and/ | or B, as | |
| | | | | | |
| | NO contributions to report, | please comp | olete Section D an | d E only | |
| A. REPORTABLE DISCLOSURE – GIFTS * (AGC | | | , | | |
| | AME & TITLE OF DONOR | DATE OF | DESCRIPTION | AMOUNT/ | |
| (Name of Board Member or immediate family member) | | GIFT | OF GIFT | VALUE | |
| raminy memoer) | | | | | |
| | | | | | |
| * Attach additional pages if necessary | | | | | |
| | | | | | |
| B. REPORTABLE DISCLOSURE - CAMPAIGN CO | | 1) | | | |
| NAME OF RECIPIENT (Name of Board Member NAME & TITLE OF | | DATE OF | | Assorbus | |
| or Controlled Committee receiving campaign contribution) | CONTRIBUTOR | Co | CONTRIBUTION AMOUN | | |
| Contributiony | | | | | |
| | | | | | |
| * | | | | | |
| * Attach additional pages if necessary | | | | | |
| C. TOTAL NUMBER OF PAGES (including thi | s page) | | | | |
| D. VERIFICATION | | | | | |
| I have used all reasonable diligence in prepa | ring this disclosure. I declare und | der penalty of | periury that I have re | eviewed this | |
| disclosure and to the best of my knowledge | the information contained herein | and in any atta | ached schedules is tr | rue and | |
| complete. | | | | | |
| Signature of Title 6 | D (C-1 '44' - D' 1 | 6 (7) | 4 | , | |
| Signature of Lobbyist or Signature & Title of Person Submitting Disclosure for Contractor) Executed at: 427 (5) San Die Ord (City and State) Date: 1/24/04 | | | | | |
| The transfer of the state of th | | | | | |
| E. CONTRACTOR'S CERTIFICATION | | | | | |
| The contractor and the contractor's registered | d lobbyist, if any, have complied | with the disclo | sure requirements in | nposed by | |
| San Diego County Charter section 1000.1. | • | | · | | |
| Coffee on for | Prident In. | ma1- | 16 | la | |
| Signature of Contractor or Representative | Prasident / Ou | <i>i</i> rer | | 404 | |